| PATENT APPLICATION FEE DETERMINATION RECOR | | | | | | | | | Application or Docket Number 1855 9 - 2 | | | | | |
|---|---|---|--------------------|-------------------------------|--------------|------------------|--------------|------------------|--|-------|---------------------|------------------------|--|--|
| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY | | | OTHER | THAN | | |
| To | TAL CLAIMS | _ | (Column 1) (Co | | | mn 2) | TYPE | | | OR | SMALL | | | |
| | | | | | : | | RATE | | FEE | | RATE | FEE | | |
| FOR | | | NUMBER FILED NUMBI | | | ER EXTRA | BAS | BASIC FEE 375.00 | | OR | BASIC FEE | 750.00- | | |
| TOTAL CHARGEABLE CLAIMS | | | minus 20= * - | | | | X\$ 9= | | | OR | X\$18= | | | |
| INDEPENDENT CLAIMS | | | 7 minus 3 = 5 | | | | X42= | | OR | X84=ੑ | | | | |
| MU | LTIPLE DEPEN | DENT CLAIM PR | RESENT | | | | +140= | | OR | +280≠ | | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TO | TAL | | OR | TOTAL | 40 | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | | OTHER | | | |
| (Column 1) CLAIMS | | | (Column 2) | | | (Column 3) | SMALL ENTITY | | | OR | SMALL | | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | : | NUMI PREVIO PAID | BER | PRESENT EXTRA | RATE | | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | • // | Minus | " Ó | 20 | = | XS | 9= | | OR | X\$18= | | | |
| AME | Independent | | | 3 | | X4 | 2= | // | OR | X84= | | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +14 | 10= | 1 | OR | +280= | | | |
| | | | | | | | ADDI | OTAL | | | TOTAL ADDIT, FEE | <u> </u> | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | . FEE | | • | ADDII. FEE | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | * | Minus | ** | | = | X\$ | 9= | | OR | X\$18= | | | |
| AME | Independent | * | Minus | *** | CLAIM | - | X4 | 2= | | OR | X84= | | | |
| <u>.</u> | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 10= | | OR | +280= | | | |
| | | | | | | | ADDI | OTAL FEE | | OR | TOTAL ADDIT. FEE | | | |
| | (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST | | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | * | Minus | ** | | = | X\$ | 9= | | OR | X\$18= | | | |
| AME | Independent | * | Minus | *** | | = | X4 | 2= | | OR | X84= | | | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | - | | , +280= | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "O" in column 3. **TOTAL | | | | | | | | | | OR | TOTAL | | | |
| *** | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |

FORM PTO-875 (Rev. 12/02)

*U.S. Government Printing Office: 2003 — 498-278/69151

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